



Undergraduate Complete Withdrawal/ Leave of Absence Form

*****INSTRUCTIONS: FILL THIS FORM OUT COMPLETELY, SIGN IT, AND SUBMIT IT TO: THE OFFICE OF GLOBAL ENGAGEMENT, MILITARY SCIENCE, ROOM 115.**

Please Print Clearly:

Student I.D. Number:	Name (Last, First, M.I.):
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Permanent Mailing Address	Street	Apartment/Unit #

City	Province	State/Country	Zip Code

Logan Mailing Address	Street	Apartment/Unit #

City	State	Zip Code

Email:	Phone:
Current Major:	Current Academic Advisor:

From which semester(s) would you like to drop your classes?
 Fall Spring Summer No Drop(s) necessary (I will complete all classes I am currently enrolled in).

Do you currently live in USU housing? YES NO

When do you plan to return to USU? Fall Spring Summer Year: Not returning

Why are you leaving USU at this time? **(Please check all that apply).**

<input type="checkbox"/> Medical/Health	<input type="checkbox"/> Military	<input type="checkbox"/> Church Service	<input type="checkbox"/> Family Responsibilities	<input type="checkbox"/> Academic Difficulties
<input type="checkbox"/> Marriage	<input type="checkbox"/> Employment	<input type="checkbox"/> Financial	<input type="checkbox"/> Study Abroad	
<input type="checkbox"/> Transferring to Another School (Please list school) _____				
<input type="checkbox"/> Other (Please explain. If necessary, continue on back of form)				

Student Release of Information of Third Party completed.
https://www.usu.edu/registrar/ou-files/publications/publication/pub_7594253.pdf

I understand that I am responsible to pay any unpaid obligations to Utah State University.

Student's Signature: _____

Date: _____